

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) For Our Future		FEC IDENTIFICATION NUMBER ▼ C C00620971	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Centaur North Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 18 / 2016	
Mailing Address PO Box 1474		Amount 2100.00	
City Whittier	State CA	Zip Code 90609-1474	Transaction ID : VSG8M9Q4E72
Purpose of Expenditure Printing - Canvassing Literature		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 07 / 18 / 2016
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		96380.20	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Centaur North Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 18 / 2016	
Mailing Address PO Box 1474		Amount 2100.00	
City Whittier	State CA	Zip Code 90609-1474	Transaction ID : VSG8M9Q4E96
Purpose of Expenditure Printing - Canvassing Literature		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 07 / 18 / 2016
Name of Federal Candidate DONALD J. TRUMP		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		96380.20	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	4200.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Shirin Bidel-Niyat

[Electronically Filed]

Date

MM / DD / YYYY
07 / 20 / 2016

Signature